

Health Insurance Exchanges and Native Americans

Presented by the Silver State Health Insurance Exchange



Acronyms

ACA	<u>A</u> ffordable <u>C</u> are <u>A</u> ct
CHIPRA	<u>C</u> hildren's <u>H</u> ealth <u>I</u> nsurance <u>P</u> rogram <u>R</u> eauthorization <u>A</u> ct
FPL	<u>F</u> ederal <u>P</u> overty <u>L</u> evel
IHCIA	<u>I</u> ndian <u>H</u> ealth <u>C</u> are <u>I</u> mprovement <u>A</u> ct
I/T/U	<u>I</u> ndian Health Service, <u>T</u> ribal and <u>U</u> rban Indian organization programs/providers
SCHIP	<u>S</u> tate <u>C</u> hildren's <u>H</u> ealth <u>I</u> nsurance <u>P</u> rogram

Agenda

- Tribal Consultation
- Health Insurance Exchanges
- Eligibility
- Supplementing IHS Health Care With Health Insurance
- Options For Tribes to Pay for Health Insurance

Tribal Consultation

- *Nevada wants to engage in meaningful tribal consultation in a way that builds trust, shares responsibility, and respects tribal sovereignty*
 - Solicit guidance from tribes on evaluating the impact of ACA on Native American individuals and I/T/U systems
 - Establish efficient ways to verify Tribal affiliation of all applicants
 - Establish Navigators with each Tribe in Nevada
 - Work together with Nevada's Tribes to maximize the benefits offered by the ACA to Native Americans.

Tribal Consultation

The Exchange has scheduled 4 formal consultations
January 15, 2013 12:00 AM – 5:00 PM

- Nevada Health Division 4150 Technology Way Carson City, NV 89706

March 19, 2013 9:00 AM – 3:00 PM

- Western Folk Life Center 501 Railroad Street Elko, NV

June 11, 2013 9:00 AM – 3:00 PM

- Dept. of Transportation 123 E Washington Ave, Bldg B Training Room Las Vegas, NV 89101

August 13, 2013 9:00 AM – 3:00 PM

- Reno Sparks Indian Colony Reno, NV

What Does Health Reform Mean For Tribal Groups?

- Offers protections and benefits specific to Native Americans
- Increases access to health care and health insurance for Native Americans
 - Health insurance exchange implementation can increase access to coverage (specialists, treatments)
 - Expanded coverage will provide more revenue for Indian Health Service, Tribal, and Urban Indian organization (I/T/U) programs

Provisions Related to Health Exchanges

Key Affordable Care Act (ACA) provisions specific to Native American participation in health exchanges:

- More frequent enrollment periods
 - Monthly window for Native Americans to enroll
- No cost-sharing for Native Americans with income \leq 300% FPL approximately \$69,150 for a family of 4
- No cost-sharing for services provided to a Native American individual by I/T/U or Contract Health Services
- Native Americans who are eligible to receive services through IHS can also enroll in the exchange

Special Rules for Eligibility/Enrollment

- Certain categories of income excluded
 - Medicaid rules to disallow certain Native American income from being counted in determining eligibility for coverage (Federal trust payments)
 - Ensures more Native American individuals will meet qualifications for public or publicly subsidized coverage
- Eligibility verification for cost-sharing protections
 - Verification of Native American status by exchanges relies on documentation of citizenship and electronic data sources approved by Secretary, or documents showing tribal membership now accepted by Medicaid. Self Attestation is not acceptable.
- The individual mandate is not applicable to Native Americans

Supplementing IHS Healthcare with Health Insurance Offered on the Exchange

- Qualified Health Plans provide:
 - The availability to seek specialized care and or treatment at any time without depleting IHS Contract Health Service dollars
 - Expanded provider network available at all times
 - Give non-compact Tribes choice in healthcare
- Possibility of extra income/revenue for Tribal Service Units
 - If Tribal Service Units/Urban Indian Clinics contract with the insurance carriers issuing QHPs, the service unit can bill the carrier for services provided

Options for Tribes to Pay for Health Insurance

- Federal IHS funds may be used to purchase health insurance
 - Compacted Tribes may use Contract Health Service (CHS) funds
 - Third Party Revenues (TPRs) may be used
 - Non compacted Tribes may renegotiate contracted services with IHS and allocate dollars from the contract to pay for health insurance

Contact Information

Silver State Health Insurance Exchange

2310 South Carson Street

Suite 2

Carson City, NV 89701

CJ Bawden

775-687-9934

cjbawden@exchange.nv.gov